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REMARKS

Claims 1-59, 65-83 and 90-124 are herewith canceled without prejudice or disclaimer as to the subject matter thereof. Herewith claims 60-62, 84-86 and 89 are amended, claim 64 canceled, and new claims 125-132 added.

The present Response is intended to place the application in condition for allowance without raising additional issues or requiring another search of the prior art.

Entry and favorable consideration of the amendments and remarks presented herewith is earnestly solicited.

I. Rejections Under 35 USC § 102

Claims 60-64 and 84-88 stand rejected under 35 USC § 102(e) as being anticipated by U.S. Patent No. 6,430,439 to Wentkowski et al. ("Wentkowski"). The applicant respectfully asserts that the claims of the present invention are patentably distinguishable from Wentkowski and therefore the rejection is respectfully traversed.

Independent claim 60 of the present invention sets forth sensing conduction sequences occurring from one ventricular chamber to another ventricular chamber, and determining which ventricular chamber the conduction sequence originated in and which ventricular chamber it propagated to and then adjusting an anti tachycardia therapy (ATP) based on the conduction sequence information. Accordingly, the following additional limitations have been added to independent claim 60:

wherein the conductive disorder comprises a conductive disorder amenable to termination via anti tachycardia pacing (ATP) therapy delivery and wherein the therapy comprises ATP therapy and the adjusting further comprises: initiating the ATP therapy in the ventricular that one of: initiated a recent ventricular depolarization and initiated a majority of ventricular depolarizations over a predetermined time period.

Similarly, independent claim 84 sets forth sensing means located in both ventricular chambers for sensing conduction sequences occurring from one

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ventricular chamber to another ventricular chamber, and means for determining which ventricular chamber the conduction sequence originated in and which ventricular chamber it propagated to, detecting an arrhythmia which can be terminated with ATP therapy and adjusting the ATP therapy based at least in part upon the chamber the arrhythmia originated from. Accordingly, claim 84 is herewith amended to add the following limitations:

means for detecting an arrhythmia susceptible to termination via anti tachycardia pacing (ATP) therapy and adjusting the ATP therapy based at least in part upon the ventricular chamber the arrhythmia originated in.

In contrast, Wentkowski is devoid of any disclosure, teaching, or suggestion regarding classifying arrhythmias and adjusting an ATP therapy based at least in part upon the classification information. Thus, Wentkowski cannot support a rejection based on anticipation because it does not contain *each and every claim limitation*.

In addition, as previously pointed out, the histograms in Wentkowski are generated by counting the number of senses and paces occurring through the right ventricular channel during each cardiac cycle for a specified period of time, and each counted sense or pace is assigned to an interval bin representing the R-R interval for that cardiac cycle. Event frequencies are then calculated based on the counts and expressed as a percentage of total cardiac cycles during the specified period of time. Wentkowski does not teach determining which chamber a conduction sequence originates in and which chamber the conduction sequence propagated to, as set forth in independent claims 60 and 84 of the present invention. Therefore, independent claim 60 and claims 61-64 dependent thereon and independent claim 84 and claims 85-88 dependent thereon are patentably distinguishable from Wentkowski. Accordingly, it is respectfully requested that the rejection be withdrawn.

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II. Rejections Under 35 USC § 103

Claim 89 stands rejected under 35 USC § 103(a) as being unpatentable over Wentkowski in view of U.S. Patent No. 6,146,586 [sic: actually 5,141,586] to Mower. The rejection is respectfully traversed.

Applicant respectfully asserts that Mower is devoid of any disclosure relating to anti tachycardia pacing (ATP) therapy. In fact, the only reference to "tachycardia" Applicant could locate in Mower is the following (which merely relates to *prior art techniques* regarding pacing rates for 'standard' bradycardia and tachycardia chamber capture):

U.S. Pat. No. 4,503,857 to Boute, et al. discloses a ventricular pacing protocol in which either spontaneous bradycardia or tachycardia is altered first by ventricular capture, followed by gradual increase or decrease, respectively, in the rate of pulse pacing until a normal programmed pacing rate is reached.

Mower teaches a method and apparatus for cyclic ventricular pacing starting at a rate just above the intrinsic atrial firing rate (overdrive pacing), followed by relaxation to a rate just below the intrinsic atrial firing rate (ventricular escape). Neither Wentkowski nor Mower, alone or in combination, teach or suggest determining which chamber a conduction sequence originates in and which chamber the conduction sequence propagated to, or adjusting an ATP therapy based in part upon the 'originating ventricle' as set forth in independent claim 84 of the present invention. Therefore, claim 89 dependent upon independent claim 84 is patentably distinguishable from the combination of Wentkowski and Mower. Accordingly, it is respectfully requested that the rejection be withdrawn.

III. Conclusion

There being no further outstanding objections or rejections, it is submitted that the claims of the present application are in condition for allowance and a Notice of Allowance earnestly solicited so the claimed invention may pass to

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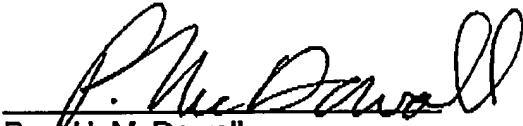
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timely issuance as U.S. Letters Patent. An early action to that effect is
courteously solicited.

Finally, if there are any formal matters remaining after this response, the
Examiner is requested to telephone the undersigned attorney to attend to these
matters.

Respectfully submitted,
Chester L. Struble

28 Oct 05
Date


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